



STATE ETHICS COMMISSION
1001 BISHOP STREET, PACIFIC TOWER 970
P.O. BOX 616, HONOLULU, HAWAII 96809
TEL.: 587-0460 FAX: 587-0470

FILING FORM D-103A (Rev. 8/95) To be filed
by elected officials, state employees, and
board and commission members

DISCLOSURE OF FINANCIAL INTERESTS

WHO SHOULD FILE THIS FORM: HRS section 84-17 requires annual filings. Persons who have filed an initial long form (D-201) may, in odd-numbered years, use this short amendment form if they have no more than 10 amendments or changes to report.

THIS SPACE FOR OFFICE USE ONLY

DATE RECEIVED 06/02/2003	FILE NUMBER 00-D-4260
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Senator

NAME Last MENOR	First RON	Middle CHRISTOPHER
RESIDENCE ADDRESS [REDACTED]		
CITY [REDACTED]	ZIPCODE [REDACTED]	
STATE OFFICE OR POSITION HELD STATE SENATOR	TERM OF OFFICE: BEGAN: 2002 ENDS: 2004	

NAME OF:
Spouse: PATRICIA
Dependent Children: BENJAMIN,
ANDREW, AND ANTHONY

BUSINESS PHONE:
HOME PHONE: [REDACTED]

Check either number 1 or 2. If you check number 2, provide the relevant information.

1. ☐ I HAVE NO CHANGES TO REPORT SINCE MY LAST FILING

2. ☒ I HAVE THE FOLLOWING CHANGES TO REPORT SINCE MY LAST FILING.

[If you have more than ten (10) amendments or changes to report, you must complete and file a new long disclosure form. Please contact the Commission to obtain a long form.]

1 ITEM # 4 ☒ ADD ☐ DELETE ☐ CHANGE AS FOLLOWS:

CITY BANK MASTERCARD
201 MERCHANT STREET
HONOLULU, HAWAII 96813

C

2 ITEM # ☐ ADD ☐ DELETE ☐ CHANGE AS FOLLOWS:

3 ITEM # ☐ ADD ☐ DELETE ☐ CHANGE AS FOLLOWS:

4 ITEM # ☐ ADD ☐ DELETE ☐ CHANGE AS FOLLOWS:

5 ITEM # ☐ ADD ☐ DELETE ☐ CHANGE AS FOLLOWS:

6 ITEM # ☐ ADD ☐ DELETE ☐ CHANGE AS FOLLOWS:

7 ITEM # ☐ ADD ☐ DELETE ☐ CHANGE AS FOLLOWS:

8 ITEM # ☐ ADD ☐ DELETE ☐ CHANGE AS FOLLOWS:

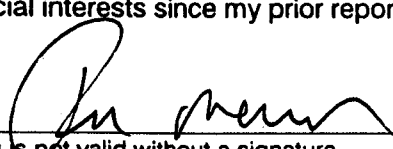
9 ITEM # ☐ ADD ☐ DELETE ☐ CHANGE AS FOLLOWS:

10 ITEM # ☐ ADD ☐ DELETE ☐ CHANGE AS FOLLOWS:

RECEIVED
03 JUN -2 P3:18
STATE OF HAWAII
STATE ETHICS COMMISSION

CERTIFICATION: I have reviewed my previous Disclosure of Financial Interests Statement filed with the Hawaii State Ethics Commission and all succeeding amendments. I hereby certify that the information I have provided on this form is a true, correct, and complete statement of my currently reportable financial interests and that there have been no other changes in my reportable financial interests since my prior reports were filed.

SIGNATURE



DATE

June 2, 2003

NOTE: This filing is not valid without a signature.